

JUL 18 2006

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# Facsimile

<b>To:</b>	Commissioner for Patents	<b>From:</b>	Madge R. Kanter
<b>Fax:</b>	(571) 273-8300	<b>Pages:</b>	41
<b>Phone:</b>		<b>Date:</b>	July 18, 2006
<b>Re:</b>	Attorney Docket No. GC22.4-CON2	<b>CC:</b>	
<b>Appin No.:</b> 10/814,025			
<b>Filing Date:</b> March 31, 2004			
<b>Title:</b>	ENZYMATICALLY ACTIVE RECOMBINANT GLUCOCEREBROSIDASE		

**Please find attached:**

Transmittal Form (1 page);

Petition for Extension of Time Under 37 CFR 1.136(a), (1 page, in duplicate);

Amendment and Response to Office Action, (12 pages);

Declaration and Exhibits A, B and C, (16 pages);

Supplemental Application Data Sheet (4 pages) with full replacement copy of the original Application Data Sheet with changes (4 pages); and

Certificate of Transmission under 37 CFR 1.8, (1 page).

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PTO/SB/97 (09-04)

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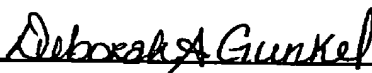
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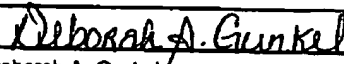
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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/814,025	
	Filing Date	March 31, 2004	
	First Named Inventor	Rasmussen et al.	
	Art Unit	1636	
	Examiner Name	Sullivan, Daniel M.	
Total Number of Pages in This Submission	41	Attorney Docket Number	GC22.4-CON2

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Declaration and Exhibits A, B and C Supplemental Application Data Sheet with full replacement copy of the original Application Data sheet Certificate of Transmission under 37 CFR 1.8
<div style="border: 1px solid black; padding: 5px;"> <b>Remarks</b>    </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
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Signature			
Printed Name	Madge R. Kanter		
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